

UTILITY PATENT APPLICATION TRANSMITTAL <small>(Only for new nonprovisional applications under 37 CFR 1.53(b))</small>		Attorney Docket No. MTM-0214	
		First Inventor Motoji Sasaki	
		Title METHOD AND APPARATUS FOR DISPENSING RADIOACTIVE LIQUID	
		Express Mail Label No.	

APPLICATION ELEMENTS <small>See MPEP chapter 600 concerning utility patent application contents.</small>	ADDRESS TO: MS Patent Application Commissioner for Patents P.O. Box 1450 Alexandria, VA 22313-1450
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<p>1. <input checked="" type="checkbox"/> Fee Transmittal Form (e.g., PTO/SB/17) <small>(Submit an original, and a duplicate for fee processing)</small></p> <p>2. <input type="checkbox"/> Applicant claims small entity status. <small>See 37 CFR 1.27.</small></p> <p>3. <input checked="" type="checkbox"/> Specification [Total Pages 19] <small>(preferred arrangement set forth below)</small><ul style="list-style-type: none">- Descriptive title of the invention- Cross Reference to Related Applications- Statement Regarding Fed sponsored R & D- Reference to sequence listing, a table, or a computer program listing appendix- Background of the invention- Brief Summary of the invention- Brief Description of the Drawings (if filed)- Detailed Description- Claim(s)- Abstract of the Disclosure</p> <p>4. <input checked="" type="checkbox"/> Drawing(s) (35 U.S.C. 113) [Total Sheets 1]</p> <p>5. Oath or Declaration [Total Sheets 2] a. <input checked="" type="checkbox"/> Unexecuted b. <input type="checkbox"/> Copy from a prior application (37 CFR 1.63(d)) <small>(for continuation/divisional with Box 18 completed)</small> i. <input type="checkbox"/> DELETION OF INVENTOR(S) <small>Signed statement attached deleting inventor(s) named in the prior application, see 37 CFR 1.63(d)(2) and 1.33(b).</small></p> <p>6. <input type="checkbox"/> Application Data Sheet. See 37 CFR 1.76</p>	<p>7. <input type="checkbox"/> CD-ROM or CD-R in duplicate, large table or Computer Program <small>(Appendix)</small></p> <p>8. Nucleotide and/or Amino Acid Sequence Submission <small>(if applicable, all necessary)</small> a. <input type="checkbox"/> Computer Readable Form (CRF) b. Specification Sequence Listing on: i. <input type="checkbox"/> CD-ROM or CD-R (2 copies); or ii. <input type="checkbox"/> Paper c. <input type="checkbox"/> Statements verifying identity of above copies</p> <p style="text-align: center;">ACCOMPANYING APPLICATION PARTS</p> <p>9. <input type="checkbox"/> Assignment Papers (cover sheet & document(s))</p> <p>10. <input type="checkbox"/> 37 CFR 3.73(b) Statement <input type="checkbox"/> Power of Attorney <small>(when there is an assignee)</small></p> <p>11. <input type="checkbox"/> English Translation Document <small>(if applicable)</small></p> <p>12. <input checked="" type="checkbox"/> Information Disclosure Statement (IDS)/PTO-1449 <input checked="" type="checkbox"/> Copies of IDS Citations</p> <p>13. <input type="checkbox"/> Preliminary Amendment</p> <p>14. <input checked="" type="checkbox"/> Return Receipt Postcard (MPEP 503) <small>(Should be specifically itemized)</small></p> <p>15. <input type="checkbox"/> Certified Copy of Priority Document(s) <small>(if foreign priority is claimed)</small></p> <p>16. <input type="checkbox"/> Nonpublication Request under 35 U.S.C. 122 (b)(2)(B)(i). <small>Applicant must attach form PTO/SB/35 or its equivalent.</small></p> <p>17. <input type="checkbox"/> Other: </p>
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18. If a CONTINUING APPLICATION, check appropriate box, and supply the requisite information below and in the first sentence of the specification following the title, or in an Application Data Sheet under 37 CFR 1.76:

☐ Continuation ☐ Divisional ☐ Continuation-in-part (CIP) of prior application No.: _____

Prior application information: Examiner _____ Art Unit: _____

For CONTINUATION OR DIVISIONAL APPS only: The entire disclosure of the prior application, from which an oath or declaration is supplied under Box 5b, is considered a part of the disclosure of the accompanying continuation or divisional application and is hereby incorporated by reference. The incorporation can only be relied upon when a portion has been inadvertently omitted from the submitted application parts.

19. CORRESPONDENCE ADDRESS					
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City Washington		State DC		Zip Code 20036	
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Names (Print/Type) David T. Nikaido/Carl Schaukowitch		Registration Nos. (Attorney/Agent) 22,663/29,211	
Signature		Date October 21, 2003	

22278 U.S. PTO

10/689051



<h1 style="margin: 0;">FEE TRANSMITTAL</h1> <h2 style="margin: 0;">for FY 2004</h2> <p style="font-size: small; margin: 0;">Effective 10/01/2003, Patent fees are subject to annual revision.</p>		Complete if Known																																																																																																																																																																																																																																													
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METHOD OF PAYMENT (check all that apply) <div style="display: flex; justify-content: space-between; font-size: x-small;"><div><input type="checkbox"/> Check</div><div><input type="checkbox"/> Credit Card</div><div><input type="checkbox"/> Money Order</div><div><input type="checkbox"/> Other</div><div><input type="checkbox"/> None</div></div> <div style="margin-top: 5px;"><input checked="" type="checkbox"/> Deposit Account: Deposit Account Number: 18-0013 Deposit Account Name: Rader, Fishman & Grauer PLLC</div> <div style="margin-top: 5px;">The Director is authorized to: (check all that apply) <div style="display: flex; justify-content: space-between; font-size: x-small;"><div><input checked="" type="checkbox"/> Charge fee(s) indicated below</div><div><input checked="" type="checkbox"/> Credit any overpayments</div></div><div style="font-size: x-small;"><input type="checkbox"/> Charge any additional fee(s) during the pendency of this application <input type="checkbox"/> Charge fee(s) indicated below, except for the filing fee to the above-identified deposit account.</div></div>		FEE CALCULATION (continued)																																																																																																																																																																																																																																													
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1202	18	2202	9	Claims in excess of 20																																																																																																																																																																																																																																											
1201	86	2201	43	Independent claims in excess of 3																																																																																																																																																																																																																																											
1203	290	2203	145	Multiple dependent claim, if not paid																																																																																																																																																																																																																																											
1204	86	2204	43	** Reissue independent claims over original patent																																																																																																																																																																																																																																											
1205	18	2205	9	** Reissue claims in excess of 20 and over original patent																																																																																																																																																																																																																																											
SUBTOTAL (2)					290.00																																																																																																																																																																																																																																										
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Names (Print/Type) David T. Nikajiro/Carl Schaukowitch	Registration Nos. (Attorney/Agent) 22,663/29,211																																																																																																																																																																																																																																														
Signature 	Telephone (202) 955-3750																																																																																																																																																																																																																																														
Date October 21, 2003																																																																																																																																																																																																																																															